

SCC eFile	2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	212547742					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: ROBINS FOUNDATION</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: WILLIAM L ROBERTS JR WACHOVIA BANK JAMES CENTER TWO 4TH FL 1021 E CARY ST RICHMOND, VA 23219</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 12/11/2012</p> <p>SCC ID NO: 00793257</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED			
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<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 1111 E. MAIN STREET STE 701</p> <p style="text-align: center;">CITY/ST/ZIP: RICHMOND, VA 23219</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: BETTY ROBINS PORTER TITLE: DIRECTOR ADDRESS: 1111 E MAIN ST SUITE 701 CITY/ST/ZIP/CO: RICHMOND, VA 23219 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: BETTY ROBINS PORTER TITLE: DIRECTOR ADDRESS: 1111 E MAIN ST SUITE 701 CITY/ST/ZIP/CO: RICHMOND, VA 23219	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT E MARCHANT DIRECTOR 1111 E MAIN ST SUITE 701 RICHMOND, VA 23219	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANN CAROL MARCHANT DIRECTOR 1111 E MAIN ST SUITE 701 RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	E CLAIBORNE ROBINS, Jr. SECRETARY 1111 E MAIN ST SUITE 701 RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GREGORY C ROBINS DIRECTOR 1111 E MAIN ST SUITE 701 RICHMOND, VA 23219	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBIN R SHIELD VICE PRESIDENT 1111 E MAIN ST SUITE 701 RICHMOND, VA 23219	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JULIET E SHIELD-TAYLOR DIRECTOR 1111 E MAIN ST SUITE 701 RICHMOND, VA 23219	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ SHERYL ROBINS NOLT SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SHERYL ROBINS NOLT, PRESIDENT PRINTED NAME AND CORPORATE TITLE	12/11/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			